

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.:	SC13003TH
	First Inventor:	Mieu V. Vu
	Title:	METHOD AND SYSTEM FOR DIRECT ACCESS TO A NON- MEMORY MAPPED DEVICE MEMORY
	Express Mail Label No.:	EV 322114161 US

<b>APPLICATION ELEMENTS</b> (see MPEP chapter 600 concerning utility patent application contents)	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450
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1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status  
See 37 CFR 1.27
3. ☒ Specification [Total Pages 16 ]  
(preferred arrangement set forth below)  
 -Descriptive title of the invention  
 -Cross Reference to Related Applications  
 -Statement Regarding Fed sponsored R & D  
 -Reference to sequence listing, a table, or computer program listing appendix  
 -Brief Summary of the Invention  
 -Brief Description of the Drawings (if filed)  
 -Detailed Description  
 -Claim(s)  
 -Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 2 ]
5. Oath or Declaration [Total Sheets 3 ]  
 a. ☒ Unexecuted (original or copy)  
  
 b. ☐ Copy from prior application (37 CFR 1.63(d))  
 (for continuation/divisional with Box 18 completed)  
  
 i. **DELETION OF INVENTOR(S)**  
 Signed statement attached deleting inventor(s)  
 name in the prior application, see 37 CFR  
 1.63(d)(2) and 1.33(b)
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large  
table or Computer Program (Appendix)
8. ☐ Nucleotide and/or Amino Acid Sequence  
(if applicable, all necessary)  
 a. ☐ Computer Readable Form (CFR)  
 b. ☐ Specification Sequence Listing on:  
 i. ☐ CD-ROM or CD-4 (2 copies); or  
 ii. ☐ Paper  
 c. ☐ Statements verifying identity of above copies

#### ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney  
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☒ Information Disclosure ☐ Copies of IDS  
Statement (IDS)/PT-1449 Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document
16. ☐ Nonpublication Request under 35 U.S.C.  
122(b)(2)(B)(i). Applicant must attach form  
PTO/SB/35 or its equivalent.
17. ☐ Other: \_\_\_\_\_

18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation    ☐ Divisional    ☐ Continuation-in- Part (CIP)    of prior application No. \_\_\_\_\_  
 Prior application information:    Examiner: \_\_\_\_\_    Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

#### 19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number	<u>23125</u>	or	<input type="checkbox"/> Correspondence address below
Name			
Address			
City	State	Zip Code	
Country	Telephone	Fax	
Name	Michael J. Balconi-Lamica	Registration No.	34,291
SIGNATURE	<i>Michael J. Balconi-Lamica</i>		Date <u>10/14/03</u>

SC13003TH

19270, U.S. PTO  
10/685561

101403

<b>FEE TRANSMITTAL</b> Patent fees are subject to annual revision <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		<b>Complete if Known</b>			
		Application Number			
		Filing Date		Concurrently Herewith	
		First Named Inventor		Mieu V. Vu	
		Examiner Name			
Group Art Unit					
TOTAL AMOUNT OF PAYMENT		(\$) <b>946.00</b>		Attorney Docket No. SC13003TH	

  

<b>METHOD OF PAYMENT (check all that apply)</b>					<b>FEE CALCULATION (continued)</b>																																																																																																																																																														
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number <b>502117</b> Deposit Account Name <b>Motorola, Inc.</b>					<b>3. ADDITIONAL FEES</b> <table style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> </tr> <tr> <th>Code</th> <th>Fee (\$)</th> <th>Code</th> <th>Fee (\$)</th> </tr> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge – late filing fee or oath</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge – late Provisional filing</td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td>For filing a request for ex parte Reexamination</td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension 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<b>SUBMITTED BY</b>				<b>Complete (if applicable)</b>			
Name (Print/Type)		Michael J. Balconi-Lamica		Registration No.		34,291	
Signature		<i>Michael J. Balconi-Lamica</i>		Telephone		512.996.6839	
				Date		10/14/03	